FORM D

ORIGINAL 1164721.

SECURITIES AND EXCHANGÉ COMMISSIÓ

Washington, D.C. 20549 FORMO SE

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D SECTION 4(6), AND/ÖR UNIFORM LIMITED OFFERING EXEMPTION

	OMB APPROVA	L
Expires: Estimated	nber: 3235-0076 May 31, 2002 average burden response 1	1.00
	SEC USE ONLY	7
Prefix		Serial
	DATE RECEIVE	D

V V	
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Sale of Series B Preferred Stock and the Common Stock convertible thereto	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506	Section 4(6) ULOE
Type of Filing: New Filing Amendment	
A. BASIC IDENTIFICATION DATA	
Enter the information requested about the issuer	
Name of Issuer check if this is an amendment and name has changed, and indicate change.) Kasenna, Inc.	02059065
Address of Executive Offices (Number and Street, City, State, Zip Code) 2091 Shoreline Blvd., Mountain View, CA 94043	Telephone Number (Including Area Code) 650.943.8600
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Type of Business Organization	
orporation limited partnership, already formed	PPOCECCE
☐ business trust ☐ limited partnership, to be formed ☐ other	r (please specify):
Actual or Estimated Date of Incorporation or Organization: Month Year 1 0 9 9	Actual Estimated OCT 0 3 2002
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation CN for Canada; FN for other foreign jurisdiction	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File. U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

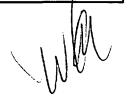
State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.



A. BASIC IDENTIFICATION DATA Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Promoter Beneficial Owner Check Box(es) that Apply: Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Gray, Mark Business or Residence Address (Number and Street, City, State, Zip Code) c/o Kasenna, Inc., 2091 Shoreline Blvd., Mountain View, CA 94043 Check Box(es) that Apply: Beneficial Owner Executive Officer Promoter Director General and/or Managing Partner Full Name (Last name first, if individual) Engdahl, Thomas L. Business or Residence Address (Number and Street, City, State, Zip Code) c/o Kasenna, Inc., 2091 Shoreline Blvd., Mountain View, CA 94043 Beneficial Owner Executive Officer Director Check Box(es) that Apply: Promoter General and/or Managing Partner Full Name (Last name first, if individual) Duncanson, Jeannie Business or Residence Address (Number and Street, City, State, Zip Code) c/o Kasenna, Inc., 2091 Shoreline Blvd., Mountain View, CA 94043 Check Box(es) that Apply: Beneficial Owner Executive Officer □ Director ☐ General and/or Promoter Managing Partner Full Name (Last name first, if individual) Krausz, Steve Business or Residence Address (Number and Street, City, State, Zip Code) 2180 Sand Hill Road, Suite 300, Menlo Park, CA 94025 Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual) Shoch, John Business or Residence Address (Number and Street, City, State, Zip Code) 480 Cowper Street, 2nd Floor, Palo Alto, CA 94301 Check Box(es) that Apply: Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Menon, Satish Business or Residence Address (Number and Street, City, State, Zip Code) c/o Kasenna, Inc., 2091 Shoreline Blvd., Mountain View, CA 94043 Beneficial Owner Executive Officer Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual) Silicon Graphics, Inc. Business or Residence Address (Number and Street, City, State, Zip Code) 1600 Amphitheatre Parkway, Mountain View, CA 94043 Beneficial Owner ☐ Executive Officer □ Director General and/or Check Box(es) that Apply: Promoter Managing Partner Full Name (Last name first, if individual)

U.S. Venture Partners VI, L.P.

Business or Residence Addr			1		
2180 Sand Hill Road, Suite					
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Entertainment Media Ven	tures				
Business or Residence Addr)		
828 Moraga Drive, 2 nd Flo	or, Los Angeles, C	CA 90049			
Check Box(es) that Apply:	Promoter	⊠ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
AMA 98 Ventures, L.P.					
Business or Residence Addr	ress (Number and S	treet, City, State, Zip Code)	1		
480 Cowper Street, 2 nd Flo	or, Palo Alto, CA	94301		_	
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Alloy Ventures 2000, L.P.					
Business or Residence Addr	ress (Number and S	Street, City, State, Zip Code))		
480 Cowper Street, 2 nd Flo	or, Palo Alto, CA	94301			
Check Box(es) that Apply:	Promoter	Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Dresdner Kleinwort Wass	erstein Partnershi	p 2001 LP 1			
Business or Residence Adda	ress (Number and S	Street, City, State, Zip Code)		
20 Fenchurch Street, Lond	don UK EC3P 3D1	В			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Booth & Co. F.B.O. Sun M	Aicrosystems, Inc.				
Business or Residence Addr	ress (Number and S	Street, City, State, Zip Code)		
901 San Antonio Road, UI		•			
		nk sheet, or copy and use ac	Iditional copies of this shee	t, as necessary)	

			<u> </u>		B. II	NFORMAT	TION ABO	UT OFFE	RING	-			
1.	Has the	e issuer sold	l, or does the	e issuer inte	nd to sell,	to non-accre	edited inves	stors in this				Yes	No ⊠
2.	2. What is the minimum investment that will be accepted from any individual?							'	N/A				
3.	Does tl	he offering	permit joint	ownership	of a single	unit?	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,		Yes □	No ⊠
 Does the offering permit joint ownership of a single unit? Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. 													
Full	Name ((Last name	first, if indiv	ridual)									
Bus	iness or	Residence	Address (Nu	imber and S	treet, City	, State, Zip	Code)	-					
Nan	ne of As	ssociated Br	oker or Dea	ler									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers			· ·	···-	· <u>.</u>	
(Check "	All States"	or check ind	ividuals Sta	ites)				•••••			🗆 А	Il States
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	[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
Full	Name (Last name	first, if indiv	ridual)									
Bus	iness or	Residence	Address (Nu	imber and S	Street, City	, State, Zip	Code)						
Nan	ne of As	sociated Br	oker or Dea	ler									
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers						
(Check "	All States"	or check ind	lividuals Sta	ates)	•••••		•••••				🔲 A	Il States
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Full	Name	(Last name	first, if indiv	idual)									
Bus	iness or	Residence	Address (Nu	umber and S	Street, City	, State, Zip	Code)						
Nar	ne of As	ssociated Br	oker or Dea	ler								,	
Stat	es in W	hich Person	Listed Has	Solicited or	Intends to	Solicit Pur	chasers					,	
(Check "	All States"	or check ind	lividuals Sta	ates)	,		• • • • • • • • • • • • • • • • • • • •		•••••		🔲 A	all States
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary)
[Click Here and choose Add Section B Page button from Toolbar to add more names or Click and press DEL.]

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PRO	CEEDS	
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$\) and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.	Aggregata	Amount Already
	Type of Security Debt	Aggregate Offering Price \$	Amount Already Sold
		\$ 20,092,382.57	\$ 20,092,382.57
	☐ Common ☐ Preferred	<u> </u>	4 <u>20102102107</u>
		\$	\$
	Partnership Interests	\$	\$
	Other (Specify)	\$	\$
		\$ 20 092 382 57	\$_20,092,382.57
	Answer also in Appendix, Column 3, if filing under ULOE.	\$ <u>20,092,382.37</u>	\$ <u>20,092,362.37</u>
	Answer also in Appendix, Column 5, it thing under OLOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		
		Number Investors	Aggregate Dollar Amount of Purchase
	Accredited investors	18	\$ <u>20,092,382.57</u>
	Non-accredited Investors.		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		Dellan Amanut
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505	N/A	\$N/A
	Regulation A	N/A	\$N/A
	Rule 504	N/A	\$ <u>N/A</u>
	Total	N/A	\$N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees	\boxtimes	\$ 100,000.00
	Accounting Fees		\$
	Engineering Fees		\$
	Sales Commissions (specify finders' fees separately.)		\$
	Other Expenses (identify)		\$
	Total'	\boxtimes	\$_100,000.00

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PR	OCEEDS	
	b. Enter the difference between the aggregate offering price given in response to Part C - Question I are total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted group proceeds to the issuer."	SS	\$_19,992,382,57
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for eac of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the boto the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.6 above.	x e	
		Payments to Officers, Directors & Affiliates	Payments to Others
	Salaries and fees	\$	\$
	Purchases of real estate	\$	\$
	Purchase, rental or leasing and installation of machinery and equipment	\$	\$
	Construction or leasing of plant buildings and facilities	\$	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger.)	\$	\$
	Repayment of indebtedness	\$	\$
	Working capital	\$	⊠ \$ <u>19,130,001.77</u>
	Other (specify): forgiveness of facility lease	\$	\$ 962,380.80
	Column Totals	\$	\$
	Total Payments Listed (column totals added)	⋈ <u>\$ 20,</u>	092,382.57

D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)	Signature	Date	
Kasenna, Inc.	O a Dunca	June 19, 2002	
Name of Signer (Print or Type)	Title or Signer (Print or Type)		
Jeannie Duncanson	Chief Financial Officer		

ATTENTION

Intentional Misstatements or Omissions of Fact Constitute Federal Criminal Violations. (See 18. U.S.C. 1001.)